Application	complete _	
Application	incomplete	

APPLICATION COVER PAGE

Date:	Date Received by ZBA:	
	d Mailing Address:	
Telephone Number(s):		
	Iailing Address (If not Applicant):	
	reet Address of Subject Property:	
•	(Owner, Tenant, Purchaser, Other)	
Nature of Application	(Special Permit, Appeal, Variance):	
Applicable Section of	Zoning Bylaw:	
	lding Inspector, Zoning Inspector, or Planning Board	
	Plans Submitted:	
Description of Propose		
	•	
I hereby request a hea above noted application	aring before the West Tisbury Zoning Board of Appeals with reference on.	e to the
	Signed:	
	Title(s):	
Application fee of \$20	0.00 is required. Date Paid:	
Descired by the Town	Clarks Data	